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07/27/2005

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Gail Driscoll	(Depositor's name)
<i>Gail Driscoll</i>	(Signature)
10-27-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/686,031	10/11/2000	Mikael Isaksson	S1022/8549	5932

TITLE OF INVENTION: METHOD FOR ESTIMATING AND SYNCHRONIZING TO FRAME BOUNDARIE OF MIS-ALIGNED CROSS- TALK SIGNALS IN A DMT SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	10/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHANG, EDITH M	2637	375-222000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Lisa K. Jorgenson

William R. McClellan

Wolf, Greenfield & Sacks,
P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

STMicroelectronics NV
STMicroelectronics S.A.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Amsterdam, Netherlands
Gentilly, France

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 10

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William R. McClellan

Date

SEPT. 8, 2005

Typed or printed name

William R. McClellan

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29,409

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